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CONFIRMATION NO. 8968

|  |   |                                  |   |                                      |                                |
|--|---|----------------------------------|---|--------------------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/532,735   | <b>FILING OR 371(c) DATE</b><br>04/25/2005<br><b>RULE</b>   | <b>CLASS</b><br>378              | <b>GROUP ART UNIT</b><br>2882   | <b>ATTORNEY DOCKET NO.</b><br>052484 |                                |
| <b>APPLICANTS</b><br>Yoshiharu Mori, Ibaraki, JAPAN;<br>Yasuyuki Akine, Ibaraki, JAPAN;<br><b>** CONTINUING DATA **</b> <i>Yes/MA</i><br>This application is a 371 of PCT/JP03/13656 10/24/2003<br><b>** FOREIGN APPLICATIONS **</b> <i>Yes/MA</i><br>JAPAN 2002-310412 10/25/2002   |   |                                  |   |                                      |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged <i>[Signature]</i><br>Examiner's Signature <i>[Initials]</i> |   | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWING</b><br>20   | <b>TOTAL CLAIMS</b><br><i>17/16</i>  | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>38834  |   |                                  |   |                                      |                                |
| <b>TITLE</b><br>Electron accelerator and radiotherapy apparatus using same   |   |                                  |   |                                      |                                |
| <b>FILING FEE RECEIVED</b><br>1360   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |                                      |                                |